

DOCUMENT # 752274

1. Entity Name

BRANDYWINE CONDOMINIUMS ASSOCIATION OF PASCO COU., INC. ✓

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90119 019 ****61.25

Principal Place of Business

C/O CALIBER MGT. INC.
32708 US 19 NORTH
PALM HARBOR FL 34684
US

Mailing Address

C/O CALIBER MGT. INC.
32708 US 19 NORTH
PALM HARBOR FL 34684
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2194902

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CIANFRONE, JOSEPH R
1968 BAYSHORE BLVD
DUNEDIN FL 34698

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD Delete
NAME GALOWSKI, LOIS
STREET ADDRESS 7120 1 COGNAC DRIVE
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD Delete
NAME COPISEY, ELMER
STREET ADDRESS 7109 4 KIRSCH CT.
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD Delete
NAME FIKSE, JOHN
STREET ADDRESS 4550 BAY BLVD. #1248
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD Delete
NAME BUKOWSKI, GEORGE
STREET ADDRESS 2211 IOWA AVENUE
CITY-ST-ZIP SUPERIOR WI 54880-0130

TITLE VPD Change Addition
NAME CHARLES NOLAN
STREET ADDRESS 7025-14 COGNAC DRIVE
CITY-ST-ZIP NEW PORT RICHEY, FL 34653

TITLE PD Delete
NAME TROST, PETER
STREET ADDRESS 7120 3 COGNAC DRIVE
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peter C. Trost
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/10/01 (727) 842-5995
Date Daytime Phone